

161 826

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/582,067	
	Filing Date	December 18, 1998	
	First Named Inventor	H. Erzgraeber	
	Art Unit	2826	
	Examiner Name	R. Forde	
Total Number of Pages in This Submission	3	Attorney Docket Number	536-009.016 (formerly IB1119)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks * with Statement Under 37 CFR 3.73(b)		

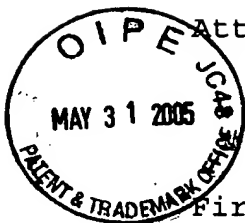
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Firm Name	Ware, Fressola, Van Der Sluys & Adolphson LLP, Bldg. 5, 755 Main St., Monroe, CT 06468		
Signature			
Printed name	James A. Retter		
Date	May 27, 2005	Reg. No.	41,266

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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Attorney Docket No.: 536-009.16

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First named inventor: Heide B. Erzgraeber

Serial No.: 09/582,067

Filed: December 18, 1998

Title: INTEGRATED CIRCUIT WITH REDUCED PARASITIC ...

Group Art Unit: 2826

Examiner: R. Forde

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND
CHANGE OF CORRESPONDENCE ADDRESS

Commissioner for Patents
PO Box 1450
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Sir:

I hereby revoke all previous power of attorney given in the above-identified application. I hereby appoint the practitioners associated with Customer Number 004955.

Please change the correspondence address for the above-identified application to the address associated with Customer Number 004955.

The undersigned also hereby authorizes the U.S. attorneys indicated herein to accept and follow instructions from:

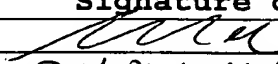
Dr. Ludger Eckey and Joachim von Oppen
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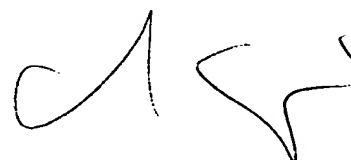
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D-10178 BERLIN
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as to any actions to be taken in the Patent and Trademark Office regarding this application.

I am the assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

Signature of Assignee of Record			
Signature:			
Name:	Prof. Dr. W. Mehr		
Date:	2005-04-22	Telephone:	# 49 (0) 335-56250





PTO/SB/98 (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Institut fuer HalbleiterphysikApplication No./Patent No.: 09/582,067Filed/Issue Date: December 18, 1998Entitled: INTEGRATED CIRCUIT WITH REDUCED PARASITIC CAPACITATIVE INFLUENCE AND METHOD OF ITS FABRICATIONInstitut fuer Halbleiterphysik

(Name of Assignee)

, a Corporation

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 010990, Frame 0699, or for which a copy thereof is attached.

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- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Prof. Dr. W. Mehl M. Stöcker

Signature

Prof. Dr. W. Mehl

M. Stöcker

Printed or Typed Name

2005-04-22

Date

49(0) 335-56250

Telephone Number

Title

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